## FORM D

# ORIGINAL

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SEC Mail Procession UNITED STATES
SEC Mail Procession EXCHANGE COMMISSION
Section Washington, D.C. 20549

SEP 11 2008

FORM D

Washington, DC 110

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

	6232
OMI	3 APPROVAL
OMB Number:	3235-0076
OMB Number:	3235-0076

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OMB Number:	3235-0076
Expires:	Ausugt 31, 2008
Estimated average but	urden
hours per response	16.00

SEC USE ONLY					
Prefix		Serial			
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Q-BLK Alpha Engine Filing Under (Check b	e, L.P. (fomerly know	n as Quellos Alph  Rule 504	a Engine, L.P.)  ☐ Rule 505	☑ Rule	506 □ Section	on 4(6) ULOE
	□ New Filing	☑ Amendment	L Ruic 303	E Ruic	300 = 500	511 1(0) <b>2</b> 0202
Type of Filing:	INCW I IIIIIg					
		A. BASIC II	DENTIFICATI	ON DATA	<u> </u>	
1. Enter the information	on requested about the is	ssuer				
	eck if this is an amendment, L.P. (fomerly know			change.)		
Address of Executive 601 Union St. 56th	Floor Seattle, WA 98			2	elephone Number ( 06-613-6700	08059907
Address of Principal B		(Number and Street,	City, State, Zip Co	ode) T	'elephone Number (1	
(if different from Exec	utive Offices)					
Brief Description of B Private Investment				<u> </u>		PROCESSED or
Type of Business Orga		<del></del>				SEP 1 8 2008 OF
□ corporation		nited partnership, alre	eady formed	₽	other (please speci	fy):
business trust	□ lin	nited partnership, to		li	mited partnership	THOMSON REUTER
	ate of Incorporation or (	Organization:	ىنا لىل	☑ Actu		
Jurisdiction of Incorpo	oration or Organization:	(Enter two-lette	r U.S. Postal Servi	ce abbreviat	ion for State:	

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 8

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	. □ Beneficial Owner	☐ Executive Officer	□ Director	Ø	General and/or Managing Partner
Full Name (Last name first, if ind Blackrock Alternative Adviso		<b>c</b>				
Business or Residence Address 601 Union Street, 56 <sup>th</sup> Floor,		treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)	,		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	0	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	-				
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)		· · · ·			
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			4
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	۵	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)		<del></del>	
	(Use blank sheet	t, or copy and use addition	al copies of this sheet, as	necessary.)		

					B. IN	FORMAT	TION .	ABOUT OF	FERING				
1.	Has the	e issuer so	old, or does t	he issuer in				nvestors in this lumn 2, if filing				Yes ☑	No □
2.	What i	s the mini	mum investr	nent that w	ill be accep	ted from any	/ individ	lual?	****************			*unless	,000,000* waived
					-			will be paid or				Yes ☑	No □
4.	a perso states,	ission or s on to be li list the n	imilar remur sted is an as	ieration for sociated pe broker or d	solicitation rson or age ealer. If mo	of purchase nt of a brok ore than five	ers in co er or de e (5) pe	onnection with a aler registered rsons to be liste	sales of secu with the SE	rities in the C and/or wi	offering. If th a state or		
Ful	l Name	(Last nan	ne first, if in	dividual)					•				
Cit	igroup	Global A	Markets, In	с.				· · · · · · ·					
			ce Address			t, City, State	•	•					
_		-		•	urt Squar	e, 22nd Fl	oor, Lo	ng Island City	, NY 1112	0			
Nai	me of A	ssociated	Broker or D	ealer									
Sta	tes in V	Vhich Pers	son Listed H	as Solicited	or Intends	to Solicit Pu	ırchaser	 S					
(	Check	"All State	s" or check i	ndividual S	tates)		•••••						All States
[Al	-	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]		[DC]	[FL]	[GA]	[HI]	[ID]
[IL [M	-	(IN) (NE)	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]		[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
įRI	-	[SC]	[SD]	[TN]	[TX]	[UT]	TV]		[WA]	[wvj	[WI]	[WY]	[PR]
		•	ne first, if in	,	1.0.	. 0' 0	<i>7</i> : 0	. 1.5					
			ce Address Broker or D		er and Stree	t, City, State	c, ZIP C	ode)					
Sta	tes in V	Vhich Pers	son Listed H	as Solicited	or Intends	to Solicit Pu	ırchaser	<u> </u>					
													All States
[AI		[AK]	[AZ]	[AR]	[CA]	[CO]	· [CT]		[DC]	[FL]	[GA]	[HI]	[ID]
[IL	]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME	] [MĎ]	[MA]	[Ml]	[MN]	[MS]	[MO]
[M' [RI		[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY [VT]		[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	<del> </del>		ne first, if in		[]			[***]		[]	[]		()
Bus	siness o	r Residen	ce Address	(Numbe	r and Stree	t, City, State	; Zip Co	ode)					
Nar	me of A	ssociated	Broker or D	ealer		_							
Sta	tes in W	hich Pers	on Listed H	as Solicited	or Intends	to Solicit Pu	rchaser	<u></u>					
(	Check	"All State	s" or check i	ndividual S	tates)	••••		\$+44+4++++++++++++++++++++++++++++++++			••••••	🗖	All States
[AI		[AK]	[AZ]	[AR]	[CA]		[CT]		[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [M		[IN] [NE]	{IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME [NY		[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI		(SC)	[SD]	[TN]	[TX]	[UT]	[VT]		[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged.		Aggregate	Am	ount Already
	Type of Security		ffering Price		Sold
	Debt	\$	0	\$	(
	Equity	\$	0	\$	(
	□ Common □ Preferred				
	Convertible Securities (including warrants)	<b>S</b>	0	\$	(
	Partnership Interests	<b>\$</b>	0	\$	(
	Other (Specify) Limited Partnership Interests	<b>s</b>	<u> Unlimited</u>	<b>\$</b>	54,666,624
	Total	\$	Unlimited	\$	54,666,624
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	Do	Aggregate Illar Amount f Purchases
	Accredited Investors		13	\$	54,666,624
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of Offering		Type of Security	Do	ollar Amount Sold
	Rule 505		•	¢	0
	Regulation A			_	0
	Rule 504		N/A	\$_	0
	) Total		N/A	¢_	0
	7 10:41			Ψ_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees.			\$	(
	Printing and Engraving Costs			\$	C
	Legal Fees		_ <b></b>	\$	100,000
	Accounting Fees		<b>∅</b>	<b>\$</b>	25,000
	Engineering Fees			\$	(
	Sales Commissions (specify finders' fees separately)		_	\$	(
	Other Expenses (identify) Administrative/Custodial Fees /Director's Fees			\$	(
	Total		<b>⊘</b>	\$	125,000
	10(a)		e e	·	

amount of the adjusted gross proceeds to amount of the adjusted gross proceeds to posses shown. If the amount for ar the left of the estimate. The total the issuer set forth in response to Postate	inery and equipment itiese of securities involved in this offering that may nother issuer pursuant to a merger)	d d d d d d d d d d d d d d d d d d d	0 0 0 0	\$   \$   \$   \$	unlimited  ments To Others  0 0 0
poses shown. If the amount for ar he left of the estimate. The total he issuer set forth in response to P estate	ny purpose is not known, furnish an estimate an of the payments listed must equal the adjuste art C - Question 4.b. above.  inery and equipment	d d Payme Officers, & Aff	0 0 0 0	\$   \$   \$   \$	0 0 0
estate	inery and equipmentitiese of securities involved in this offering that may nother issuer pursuant to a merger)	Officers, & Aff   \$   \$   \$   \$   \$   \$   \$   \$   \$   \$   \$   \$   \$   \$	0 0 0 0	\$   \$   \$   \$	0 0 0
estate	inery and equipmentitiese of securities involved in this offering that may nother issuer pursuant to a merger)		0 0 0	□ \$ □ \$ □ \$	0
or leasing and installation of mach easing of plant buildings and facilither businesses (including the valuinge for the assets or securities of a debtedness	itiese of securities involved in this offering that may	\$   \$ /     \$ 	0 0	□ \$ □ \$	0
or leasing and installation of mach easing of plant buildings and facilither businesses (including the valuinge for the assets or securities of a debtedness	itiese of securities involved in this offering that may	\$   \$ /     \$ 	0 0	□ \$_ □ \$_	
her businesses (including the value nge for the assets or securities of a debtedness	e of securities involved in this offering that may nother issuer pursuant to a merger)	/       \$  \$	0		0
her businesses (including the value nge for the assets or securities of a debtedness	e of securities involved in this offering that may nother issuer pursuant to a merger)	/       \$  \$	0	□ <b>\$</b>	
nvestment in securities			0		0
nvestment in securities		□ \$	<u> </u>	□ \$_	0
			0	□ \$	0
				☑ \$	Unlimited
				፼\$	Unlimite
isted (column totals added)		••••	Ø\$	Unlimite	<u>:d</u>
· · · · · · · · · · · · · · · · · · ·	<del></del>				
	D. FEDERAL SIGNATURE				
n undertaking by the issuer to furn by the issuer to any non-accredite	e undersigned duly authorized person. If this notish to the U.S. Securities and Exchange Comm d investor pursuant to paragraph (b)(2) of Rule	ission, upon w	ritten requ	est of its	staff, the
	Title of Signer (Print or Type)		1		-
general partner ancial Management, Inc.,	General Partner of Issuer				
nt or Type)	Title of Signer (Print or Type)				<del></del>
	Managing Director of BlackRock Finance	cial Managen	nent, Inc.	Ī	
	n undertaking by the issuer to furn	n undertaking by the issuer to furnish to the U.S. Securities and Exchange Comm by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule  Signature  Title of Signer (Print or Type)  Active Advisors (GenPar), LLC, general partner ancial Management, Inc., nber  Title of Signer (Print or Type)  Title of Signer (Print or Type)	n undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon we by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  Signature  Title of Signer (Print or Type)  Active Advisors (GenPar), LLC, general partner ancial Management, Inc., nber  Title of Signer (Print or Type)  Title of Signer (Print or Type)	n undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written required by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.    Signature	n undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.    Signature

END

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)